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FEB 09 2004

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/049,937	02/20/2002	Masahiro Nomura	219277US0PCT	2562

TITLE OF INVENTION: SUBSTITUTED BENZYLTHIAZOLIDINE-2 4-DIONE DERIVATIVES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	03/18/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WRIGHT, SONYA N	1626	424-464000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OBLON, SPIVAK,

2 McCLELLAND, MAIER

3 &amp; NEUSTADT, PC

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KYORIN PHARMACEUTICAL CO., LTD.

Tokyo, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee

☐ Advance Order - # of Copies -0-

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(Authorized Signature)

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*Joseph A. Hefetta Jr. Reg. No. 24,803 Feb. 9, 2004*

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02/12/2004 CCHAU2 00000232 150030 10049937

01 FC:1504 300.00 DA

02/12/2004 CCHAU2 00000233 10049937

01 FC:1501 1330.00 DP

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